

MISCELLANY

Under this department are ordinarily grouped: News Items; Letters; Special Articles; Twenty-Five Years Ago column; California Board of Medical Examiners; and other columns as occasion may warrant. Items for News column must be furnished by the fifteenth of the preceding month. For Book Reviews, see index on the front cover, under Miscellany.

NEWS

Coming Meetings†

California Medical Association. Place and date of the 73rd Annual Session, to be held in 1944, to be announced later.

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American Medical Association. Place and date of 1944 Annual Session to be announced later.

The Platform of the American Medical Association

The American Medical Association advocates:

1. *The establishment of an agency of Federal Government under which shall be coordinated and administered all medical and health functions of the Federal Government, exclusive of those of the Army and Navy.*

2. *The allotment of such funds as the Congress may make available to any state in actual need for the prevention of disease, the promotion of health, and the care of the sick on proof of such need.*

3. *The principle that the care of the public health and the provision of medical service to the sick is primarily a local responsibility.*

4. *The development of a mechanism for meeting the needs of expansion of preventive medical services with local determination of needs and local control of administration.*

5. *The extension of medical care for the indigent and the medically indigent with local determination of needs and local control of administration.*

6. *In the extension of medical services to all the people, the utmost utilization of qualified medical and hospital facilities already established.*

7. *The continued development of the private practice of medicine, subject to such changes as may be necessary to maintain the quality of medical services and to increase their availability.*

8. *Expansion of public health and medical services consistent with the American system of democracy.*

Medical Broadcasts*

The Los Angeles County Medical Association:

The following is the Los Angeles County Medical Association's radio broadcast schedule for the current month, all broadcasts being given on Saturdays.

KFAC presents the Saturday programs at 8:45 a. m., under the title "Your Doctor and You."

In July, KFAC will present these broadcasts on the following Saturdays: July 3, 10, 17, 24 and 31.

The Saturday broadcasts of KECA are given at 10:45 a. m., under the title "The Road of Health."

"Doctors at War":

Radio broadcasts of Doctors at War by the American Medical Association in coöperation with the National Broadcasting Company and the Medical Department of the United States Army and the United States Navy are on the air each Saturday at 2 p. m., Pacific War Time.

† In the front advertising section of *The Journal of the American Medical Association*, various rosters of national officers and organizations appear each week, each list being printed about every fourth week.

* County societies giving medical broadcasts are requested to send information as soon as arranged.

Pharmacological Items of Potential Interest to Clinicians*:

1. *Reviews:* Really hot, says M. Shimkin, is J. P. Greenstein's survey of tumor enzymology (*J. Nat. Cancer Inst.*, 3:419, 1943). Then there's N. J. Berrill's study of malignancy in relation to organization and differentiation, and A. Dorfman's review of pathways of glycolysis (*Physiol. Rev.*, 23:101, 124, 1943). Also note C. Monge's survey of chronic mountain sickness (*Ibid.* p. 166). W. Raab reviews the pathogenic significance of adrenalin and its relatives for heart muscle. (*Exp. Med. & Surg.*, 1:188, 1943). H. C. Clark goes over recent work on prophylaxis and treatment of malaria (*J. Nat. Malaria Soc.*, 1:113, 1943). J. N. Davidson offers brief summary with big bibliography of "wound hormones" (*Edin. Med. J.*, 50:70, 1943). A. Lipschitz summarizes his studies on endocrine aspects of antitumoral autodefense (*Rev. Canad. Biol.*, 2:92, 1943). L. Brouha & Co. survey work on "step test" to measure physical fitness for hard muscular labor (*Ibid.*, p. 86). L. W. Shaffer reports on present status of intensive arsenotherapy of early syphilis (*Ven. Dis. Info.*, 24:108, 1943). E. W. Thomas and G. Wexler do likewise (*Arch. Dermat. Syph.*, 47:553, 1943).

2. *Symposia:* Pleasant one on impetigo (*Lancet*, 244:544, 547, May 1, 1943). Important one on scientific proof and relations of law and medicine (*Ann. Int. Med.*, 18:445-697, 1943). Interesting one on stuttering in remarkable new journal *The Nervous Child* (2:79, 1943).

3. *Shock:* In elaborate studies on traumatic shock, J. Fine, A. Seligman & Co. find that oxygen has no value in hemorrhagic shock (*J. Clin. Invest.*, 22:265-305, 1943). F. L. Engel, M. G. Winton and C. N. Long show that hemorrhagic shock causes liver and tissue injury from anoxia with increased proteolysis and lactate and pyruvate accumulation (*J. Exp. Med.*, 77:397, 1943). G. F. Kamen (*Proc. Soc. Exp. Biol. Med.*, 52:363, 1943) suggests that lipid breakdown products like acrolein may have some causative relation to shock. J. P. Levinson and H. E. Essex (*Ibid.*, p. 361) show that peripheral vasoconstriction occurring in shock is not dependent on an intact nerve supply. P. L. Mollison discusses hemolytic transfusion reactions (*Brit. Med. J.*, 2:529, May 1 and 8, 1943).

4. *A Few Books:* C. C. Thomas (Springfield, Ill.) publishes C. L. Gemmill's *Physiology in Aviation*, an inexpensive and brief item. J. B. Sumner and G. F. Somers issue *Chemistry and Methods of Enzymes* (Academic Press, N. Y.). G. L. Walls writes on *The Vertebrate Eye and Its Adaptive Radiation* (Cranbrook Inst. Science, Bloomfield Hills, Mich.). J. H. Masserman discusses *Behavior and Neurosis* (Univ. Chicago). Oxford issues E. J. Bowen's *Chemical Aspects of Light*. C. C. Thomas (Springfield, Ill.) also publishes J. A. Reyniers' *Micrurgical and Germ-Free Methods: Their Application to Experimental Biology and Medicine*. And here's another salute to Herbert Evans—for whose 60th birthday the University of California publishes a special volume of scientific tribute. Stanford Press will issue A. C. Reed's *Tropical Medicine*.

5. *Alia:* H. A. McGuigan's ideas on mass hysteria hide a pertinent point (*J. Asso. Am. Med. Col.*, 18, 182, 1943). Why have scientific periodicals—read *Life*! And did you note the article about our L. L. Lumsden in *Satevepost*? Of course, development of resistance to penicillin is noted

* These items submitted by Chauncey D. Leake, formerly Director of U. C. Pharmacologic Laboratory, now Dean of University of Texas Medical School.

(L. H. Schmidt and C. L. Sesler, *Proc. Soc. Exp. Biol. Med.*, 52:353, 1943). M. R. Sapirstein finds glutamic acid controls ammonium ion enzymatically in brain and thus may control epileptic convulsions (*Ibid.*, p. 334). C. Gutierrez-Noriega notes metrazol convulsions due to summation of local stimuli augmenting direct action on the drug on motor neurones: there is no evidence for a convulsant center (*J. Neuropath. Exp. Neurol.*, 2:132, 1943). J. J. Piffner & Co. isolate antianemic factor from liver in crystalline form (*Science*, 97:404, 1943). B. C. McIvor and S. P. Lucia describe method of getting anti-Rh serum (*Proc. Soc. Exp. Biol. Med.*, 52:293, 1943).

Doctors of Medicine as Others See Them.—During recent years, the medical profession and its work have been much misrepresented in certain lay publications. A perusal of editorial comments appearing in some California newspapers, in which appreciation is expressed for the healing and altruistic work of physicians, should therefore be of interest.

The above item, with some quotations, appeared in CALIFORNIA AND WESTERN MEDICINE (July issue, pages 108-109; October, pp. 269-270; November, pp. 287 and 331-332; January, pp. 49 and 50; February, pp. 92-93; April, pp. 255-257; and May, pp. 305-308. More recent items follow:

THE DOCTOR IS RATIONED

Recently Dr. Maxwell Lapham of the War Manpower Commission announced in Washington that during this year approximately 12,000 physicians would be called into the armed forces, leaving about 80,000 to care for accidents and ailments on the home front. This, he ventured, would reduce the ratio of doctors to one for every 1,500 persons, "the outer limit of safety from the standpoint of public health."

Some communities, nevertheless, already find themselves beyond that limit of safety, and everywhere doctors are scarce and their time precious. The problem is by no means separate from the public responsibility. Action must be taken to ease the strain, action by individuals, as a safeguard to personal health and as a war time obligation.

First it is imperative at once to impose on ourselves a voluntary rationing of the doctor's time as far as our own demands on him are concerned. An average adult can learn to identify danger signs that actually require a doctor on the spot as well as he can recognize the slight symptoms he can handle himself. As a matter of fact, few medical ailments cannot afford to wait a short time for diagnosis, according to the eminent Dr. Thomas Masters, who points out, too, that fears rise inordinately at night, necessitating many useless calls when hard working physicians desperately need their rest.

Finally, for the sake of public health and the health of our own loved ones, it is wise, for the duration of doctor rationing at least, to learn and remember the common rules that keep human beings well, and to keep our nerves steady and common sense in command if unpreventable illness does strike.—*Sacramento Daily Recorder*, May 12.

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MATCH THIS RECORD

More than 28,000 physicians volunteered their services without pay to the Selective Service boards. More than 40,000 physicians gave up their careers in civilian practice to serve with the armed forces. This directing board of the Procurement and Assignment Service for Physicians, and its many representatives throughout the nation, serve without one cent of remuneration. The hundreds of physicians on the consultant committee of the Division of Medical Science of the National Research Council, and in the office of Research and Development, contribute time and income without one cent of remuneration. Throughout

the nation, thousands of doctors furnish countless services in connection with civilian defense, without one cent of remuneration. It would be interesting to know what other trade or profession can match this record of public service.

And yet proposals are made to throw American medicine into the political arena, and level it off to the standards prevailing in European countries where experiments in socialized medicine have utterly failed to produce the health records and benefits to the general public which are the rule rather than the exception in the United States. Fortunately for the people of this country, such efforts seem to have failed.

American medicine is marching ahead unselfishly and scientifically in its determination to maintain for our armed forces and the people at home the highest medical standards in the world—not for this year, or next year, but for every year.—*Hanford Sentinel*, May 24.

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FACTS ABOUT SOCIALIZED MEDICINE

We believe it would, indeed, be profitable for those who advocate governmental direction of medical aid and who know little or nothing about socialized medicine, to stop and consider the plan as now operated in England. By and large, the medical profession of the United States have done and are doing a fine job. It was our privilege several years ago at an editorial round-table discussion, to refute statements made by Professor May of the University of California, who spoke on the subject at Stanford University.

To substantiate our thesis we wish to cite a few facts from England that eloquently and factually relate the story of compulsory health insurance. Under the British system of health insurance a physician has a panel of 1,000 to 2,500 patients at \$2.25 each per year. He may have to see 100 patients a day. Frequently as many as sixty persons must be seen in his office in two hours—two minutes per patient, including paper work. There is no time for adequate treatment. If a panel physician keeps patients waiting too long, they report him to his superiors. Unlike American physicians, the panel physician in England rarely has the time or the energy to study, engage in research, attend medical meetings or take refresher courses.

It is easy to see why doctors oppose schemes to emasculate the American medical system. It has its shortcomings, but fundamentally it is the most efficient, far-reaching system yet devised. Infinitely more important, it is a system which inspires initiative and progress. Within its framework doctors are free individuals. Tomorrow, next week, next year, as the future rolls into the present, new techniques and new cures will come from the imaginative, probing minds of American medical men. It would be calamitous to freeze medicine into a compulsory socialistic mold that would kill the souls of these men.—*Isleton Journal*, May 21.

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THE RATIONING OF OUR DOCTORS

Reading in news columns of the fiftieth anniversary of the organization of the Riverside Medical Society calls to mind the fact that this year approximately 12,000 physicians of the nation would be called into the armed forces, leaving about 80,000 to care for accidents and ailments on the home front.

This would reduce the ratio of doctors to one for every 1,500 persons, "the outer limit of safety from the standpoint of public health."

California Tuberculosis Association

The California Tuberculosis Association is the state organization which administers in California the general policies and principles of the National Tuberculosis Association. The California Tuberculosis Association is a

federation of sixty-two local associations; it is democratically controlled by representation proportionate to the funds raised by each of the locals. The California Tuberculosis Association receives 16 per cent of the gross seal sale for the first \$10,000 raised, 11 per cent for the next \$10,000, and 7½ per cent for all over \$20,000.

Each local association receives in return many of the services offered by the California Tuberculosis Association. The state office acts as a clearing house for supplies and for ideas. One of the main functions of its staff is to give assistance to the smaller local associations in this state which do not have sufficient funds to maintain trained tuberculosis health workers.

All local associations operate under "Authorized Forms of Tuberculosis Work" as approved by the National Tuberculosis Association. Permissible activities are health education, coöperation with other agencies, research and study, case-finding demonstrations, and organization and administration.

American Medical Association Will Meet in San Francisco in 1946.—Chicago—AP—San Francisco yesterday was selected for the 1946 meeting of the American Medical Association, the war permitting.—Sacramento Union, June 10.

Lane Medical Lectures.—The Lane Medical Lectures are now generally recognized as an international institution. The imposing array of illustrious lecturers from many foreign lands, as well as this country, shows this rather conclusively. This result happily fulfills the vision of the founder, the late Dr. Levi Cooper Lane, also the founder of Cooper Medical College, now the Stanford School of Medicine.

It was Doctor Lane's idea to bring leading medical scientists from Europe, where great advances were then being made, to California and the West rather than to send Western physicians there. Above all, he believed the personal contact and inspiration of these leaders was most valuable for his colleagues and his institution. Not only has this aim been amply fulfilled, but the high quality and the influence of the lectures as sources of information and of provoking thoughts and ideas for research and discoveries is attested by numerous references to them in the literature of medicine.

In a period close to fifty years since the lectures were established, almost every branch of medical science has been represented by outstanding experts, discoverers, or investigators. The Stanford medical faculty, always mindful of the aims and desires of the founder, intend to maintain these lectures on the highest plane possible as a means of promoting the value and influence of medical science everywhere.

The last eight series of the Lane Medical Lectures have been published by the Stanford University Press, Stanford University, California.—The Stanford *Colophon*, April, 1943.

United States Naval Hospital at Mare Island Entertains Sonoma, Solano, Marin and Napa County Medical Societies.—The United States Naval Hospital at Mare Island, through the courtesy of the Medical Officer in Command, Capt. J. P. Owen (MC), U. S. N., and Capt. Frank W. Ryan (MC) U. S. N., Executive Officer, on Tuesday evening, June 8, 1943, had as guests members of the Sonoma, Solano, Marin, and Napa County Medical Societies.

This conjoint dinner, at which colleagues who are attached to the United States Naval Hospital were the hosts, has become an annual event and is looked forward to with increasing interest by all who have had the opportunity to attend.

It is particularly interesting to note that this expression of coöperation comes from physicians who are in military service, the extension of courtesy being to colleagues who are in civilian practice.

An excellent dinner was served, after which the meeting was adjourned to the theatre building, where the scientific program was presented by staff members of the Naval Hospital.

In the program were listed the names of the following staff members.

Capt. J. P. Owen (MC) USN, Medical Officer In Command.

Capt. Frank W. Ryan (MC) USN, Executive Officer.

Capt. R. I. Longabaugh (MC) USN (Ret.), Gas and Security Officer.

Capt. C. G. Hines (MC) USN, Chief of Psychiatric Service.

Commander E. F. Holman (MC)V(S) USNR, Chief of Surgery.

Commander E. L. Markthaler (MC)V(S) USNR, Chief of Medicine.

Commander J. W. Thompson (MC)V(S) USNR, Chief of Eye, Ear, Nose and Throat.

Lt. Comdr. P. R. Yeeks (MC)V(S) USNR, Chief of X-ray Service.

Lt. Comdr. B. E. Konwaler (MC)V(S) USNR, Chief of Laboratory Service.

Lt. Comdr. J. W. McPheeters (MC)V(S) USNR, First Lieutenant (Maintenance Officer).

Lieut. E. F. Aron (MC) USN, Assistant Administrative Officer.

Lieut. J. R. Ayer (HC) USN, Hospital Corps Officer.

Lieut. (jg) G. E. Harris (HC) USN, Commissary Officer.
Chief Pharmacist G. R. Gibson (HC) USN, Personnel Officer.

Pharmacist A. V. Watson (HC) USN, Property and Accounting Officer.

The program of the evening follows:

Demonstration of Patients with Stader Splints.

Film—Application of Stader Splint.

Demonstration of Patients with Pylon and Artificial Leg—Dr. Douglass Toffelmier.

Demonstration of Patients with Wax Treatment for Burns—Dr. Ralph G. Pendleton.

"The War Neuroses"—Dr. F. H. Smith.

Films:

(a) Excision of Brachial Aneurism—Dr. E. F. Holman.

(b) Hospital Views, Presentation of: War Decorations. The Surgeon General's Visit.

Doctor Toffelmier presented a series of patients on whom the Stader splint had been used. Different types of the splint were shown, its advantages as regards rotation, lengthening and tilting being pointed out, and its modes of applications indicated by demonstration and also later on the screen.

This splint is not yet available on the open market, but at the Mare Island Hospital has been much used. Doctor Toffelmier explained that with the splint it is necessary perhaps to set more of the fracture by hand, but once the fragments are in place and the splint applied, the portion involved is in solid position. The splint is probably better adapted for hospital than for field service. Even in secondary closures, the splint has been found to be of much value. With its use, there is much greater possibility of the patient becoming either fully or partially ambulatory.

Doctor Toffelmier also presented patients to demonstrate the use of Pylon and artificial legs. Mention was made of the adaptability of this procedure even when stumps are short. Method of securing good stumps was described.

Dr. Ralph G. Pendleton discussed in some detail a wax treatment for burns which has been developed in good part at the Mare Island Hospital. He referred to local and general reactions in relation to burns of different degrees and methods of cleansing, and procedures in preparation for the use of the wax combination which is sprayed on. A special advantage of the procedure is that it does not

need a trained person to apply it. The hours saved in care of burn cases is very great. The treatment can precede or follow other procedures and the application of the wax not only alleviates pain and local distress, but promotes early motion of the parts involved, and aids in the prevention of contractures. The mixture is quite inexpensive.

Patients and films completed the demonstration.

Dr. F. H. Smith, the third speaker, gave an illuminating address concerning war neuroses, calling attention to some of the new types of such that have come under observation due to the present-day methods of warfare. It is not surprising that when men are subject to bombardment day and night, with little opportunity for rest and all the ordinary routine of living done away with, and under conditions made more complicated by rain, heat and diseases such as dysenteries, malaria, they crash up mentally and physically. In some places, as at Guadalcanal, these conditions were intensified by a feeling of helplessness and the impression that they would be left alone and could not be rescued.

The symptoms were briefly mentioned and tentative figures in incidence of such breakdowns were given.

Also discussed was the prognosis in many of these patients, not only as regards return to normal mental and physical health, but in relation to capacity to again take up the responsibilities of military life, either full or limited, or civilian activities.

The program was completed by the presentation of films taken at the Mare Island Hospital, the same being interspersed with comments by the Medical Officer in Command, Capt. J. P. Owen, who pointed out the importance in an institution such as the Mare Island Hospital, to maintain morale and proper esprit de corps.

Tribute Paid to Doctor Zeiler.—Approximately 100 of his colleagues and friends honored Dr. A. Herman Zeiler, pathologist, at a dinner at the University Club sponsored by the executive medical board of the California Hospital last night.

Dr. Benjamin H. Hager, chairman of the staff of the hospital, was chairman of the meeting, and Dr. E. J. Cook, emeritus chairman of the staff, was toastmaster. Speakers included Doctors John W. Grossman, Howard F. West, Donald G. Tollefson, E. Vincent Askey and E. H. Wiley.

Doctor Zeiler started a laboratory here in 1911. In 1917 he became pathologist for the California Hospital.*—Los Angeles *Examiner*, June 8.

New Drug—Penicillin.—*The Journal of the American Medical Association* recently described penicillin, a newly used drug, as "far superior to any of the sulfanilamides" in treating infected wounds and burns.

Because of production difficulties, the *Journal* said, use of the drug will be limited almost entirely to the armed forces for the present.

The drug was first used by the Army six weeks ago when arrangements were made by the surgeon-general for clinical tests at Bushnell General Hospital, Brigham City, Utah.

"Results have been so encouraging," the *Journal* reported, "that plans now are in process for undertaking similar wound studies in ten general army hospitals and venereal disease studies in six. A similar though less extensive plan will be pursued by the navy."

Penicillin, which was discovered in 1929 by Alexander Fleming in London, is made from a mold, the *Journal* said. —Bakersfield *Californian*, May 20.

* Many friends of Doctor Herman Zeiler will regret to learn that his death took place on the morning of Thursday, July 15.

He was buried from the Church of the Reformation in Forrest Lawn Cemetery on Monday, July 19, 1943.

New Treatment Is Found for Burns.—A new and simple paraffin wax spray for treatment of burns sustained by military personnel was described today in the *Journal of the American Medical Association*.

Lt. Com. Ralph C. Pendleton, U. S. N. R., in an article discussing the treatment which he developed describes the method as "the paraffin wax open air treatment."

Doctor Pendleton explained:

"The present global war has resulted in so many serious burns occurring en masse that surgeons face a challenge to devise some simple method of treatment which will be effective, humane and simple enough for application by inexperienced assistants to overworked doctors and nurses."

The treatment consists in spraying medicated paraffin on the burned parts of the body, leaving the injured sections free of cumbersome bandages and open to the air.

Using this method there is no need for cleansing or pruning the dead tissues from the burned area before applying the spray.

No gauze is needed because the wax itself serves as a dressing, according to Doctor Pendleton. It checks pain promptly, the author said, and, because it permits early free motion of injured members, prevents numerous deformities that have resulted from other methods of early treatment.

Riverside Doctors Celebrate Fiftieth Anniversary.—Fiftieth anniversary of the organization of the Riverside Medical Society was commemorated on May 13 at a special meeting of the society for which about 100 members and guests gathered for dinner at Victoria Country Club.

Dr. Bon O. Adams acted as master of ceremonies during the program, which included reading of minutes of the society for May 13, 1893, by Dr. F. A. Veitch, and reminiscences about older members of the organization by Dr. William Wallace Roblee. Tribute to Doctor Roblee and the late Dr. C. Van Zwalenburg was voiced by Dr. T. A. Card, their associate.

Gold-headed canes, traditional gifts in recognition of long service to the society, were presented to Doctor Adams, Dr. C. W. Girdlestone and Dr. R. R. Root of Corona. Doctor Roblee had received his some time ago. Dr. W. E. Gardner made the presentations.

Special guests were Dr. Clarence G. Toland of Los Angeles, who told of his father, Dr. M. R. Toland, pioneer San Jacinto physician; Dr. Fred D. West of Beaumont and Dr. Alan Bramkamp of Banning, who spoke on Dr. John C. King, early member of the society who is now past 90 and resides in Pasadena and from whom a letter to the society was read; Mrs. W. B. Payton, Mrs. Arthur L. Brown, Mrs. W. B. Wells and Mrs. H. J. Wickman.

Dr. H. W. Naeckel was chairman of arrangements for the anniversary fête which closed with gay nineties skits presented by the Community Players.—Riverside *Press*, May 14.

Weil's Disease (Leptospirosis).—The Los Angeles City Health Department recently brought to the attention of the physicians of Los Angeles two recent deaths from Weil's Disease of the icterohaemorrhagiae type, contracted in the city of Los Angeles. The department bulletin stated that there are two types of Weil's Disease: the first is caused by *L. icterohaemorrhagiae* and is contracted probably from the feces and urine of rats; the second, *L. canicola*, is contracted from dogs and cats. It has also been reported as being contracted from infected pork. The incubation period is approximately ten days. The organism usually enters through skin abrasions, although the gastrointestinal tract, nasal mucous membranes, and the conjunctiva have all been suggested.

The onset is acute, with a high continuous fever during the first few days. There is headache, vomiting, diarrhea,

and frequently a dry tongue with characteristic red edges. The conjunctiva is injected, the throat is frequently sore, rheumatic pains are common, and jaundice occurs in about 50 per cent of the cases. There may be a relapse at the end of three weeks. The mortality in the United States is about 12 per cent.

When jaundice occurs, differential diagnosis usually has to be made between Weil's Disease, Catarrhal Jaundice, Acute Yellow Atrophy of the Liver, and Yellow Fever. When jaundice does not occur, the differential diagnosis becomes much more difficult. Diagnosis is made by blood serology and by isolation of the organism from urine and blood. Blood serology does not become positive until around the third week.

Sulfa drugs and neosalvarsan are of no proved value in treatment. Sodium bismuth tartrate, intravenously, has been successful in some cases, as has been the use of hyper-immune horse serum. The control consists of the proper care of swimming pools, adequate rat proofing, and the proper handling of urine from recovered patients.

Nurses Fight for More Pay.—The State Nurses' Association, recently authorized by its members to act as their collective bargaining agent with hospitals, has called for a United States Conciliation Service mediator to help it in its wage-increase demands on California hospitals.

The nurses want \$155 a month base pay for registered nurses doing regular staff work. They said some now get as low as \$115.

If the conciliator is unable to effect an agreement, the case is to go to the War Labor Board for an order, association officials said.

Address by Commander Emile Holman.—An address on "Changing Patterns in Medical Care" was delivered by Com. Emile Holman, M. C., chief surgeon at the Mare Island Naval Hospital and head of the Stanford department of surgery, at the annual dinner and initiation of the Stanford chapter of Phi Beta Kappa on May 26.

Dinner was served at 6 p. m. in the Stanford Union. Initiation of the seventy-five new members and election of officers was conducted at that time. Commander Holman spoke at 8 p. m. in the auditorium of the Education Building.

Commander Holman is an alumnus of Stanford, where he was elected to Phi Beta Kappa in 1911. He holds degrees from Stanford, Oxford and Johns Hopkins universities. He was a Rhodes Scholar at Oxford from 1914 to 1917 and has taught at Johns Hopkins, Harvard, Western Reserve and Stanford.

A member of the American College of Surgeons, he is the recipient of various medical honors, including the Medaille de Roi Albert in 1918, when he was a member of the Committee for Relief of Belgium.—*Palo Alto Times*, May 26.

Board Names Health Officer of Los Angeles County.—Dr. H. O. Swartout yesterday was officially appointed County Health Officer by the Board of Supervisors to succeed Dr. W. L. Halverson, who resigned the position to become director of the State Department of Public Health.

Doctor Swartout has been acting County Health Officer for the last six months while Doctor Halverson was on a leave of absence which expired last Tuesday.

Prior to becoming acting head of the Health Department, Doctor Swartout was director of the bureau of preventable diseases in the department. He has had a wide experience in the medical field and holds a degree from Yale University as doctor of public health.—*Los Angeles Times*, June 18.

On Civilian Defense.—Operations Letter No. 131 from James M. Landis, Director of the Office of Civilian Defense, Washington, D. C., issued June 12, 1943, under the caption "The Health Department in Civilian Protection." Operations Letter No. 131 has been issued to clarify health department functions in civilian protection. Other material outlining technical operations of the health department in event of air raids or other wartime disaster is under preparation.

Infantile Paralysis.—A project which will make The National Foundation for Infantile Paralysis the only complete central, authentic source of information on infantile paralysis in the world was recently announced by the Foundation.

A complete bibliography of all scientific literature that ever has been published pertaining to infantile paralysis is being compiled by the Foundation, and is expected to be ready for publication in book form in the early part of 1944. The first volume will contain a record of all scientific material on poliomyelitis published in the world up to the end of 1943. Subsequently, the data will be kept up to date by publication of annual supplements. Brief abstracts of the more important articles will be included in the bibliography to be published by the Foundation, 120 Broadway, New York.

American Board of Otolaryngology.—An examination of applicants for the American Board of Otolaryngology will be held in Los Angeles on February 2, 3, 4, 5, 1944. Applications must be filed with Dr. Dean M. Lierle, Secretary-Treasurer, University Hospital, Iowa City, Iowa, by November 1, 1943.

Visiting Nurses Ease Medical Care Shortage.—As a step toward combating the threat to public health feared because of the induction of thousands of doctors and nurses into the armed forces, the American Red Cross has launched visiting nurse programs in several war-swollen communities on the Pacific Coast.

Reports on their pioneering indicate success and is already rewarding this effort to halt the possible "slow deterioration" in the nation's health that has been forecast as the probable result of acute shortages in medical care.

Vallejo, California, and Bremerton, Washington, rapidly growing naval construction centers, are outstanding examples of communities facing serious problems as the result of simultaneous loss of medical power and multiplication of population. In both cities, employment of visiting nurses by the Red Cross has sharply reduced the demands upon remaining physicians and hospital facilities. These nurses in many cases can make patients' calls upon doctors unnecessary or at least greatly reduce the number. They work in close coöperation with welfare and other official agencies.

In Spokane, Wash., and twenty-four smaller communities in the Mid-West and Pacific area, similar programs have been launched.

Nurse Shortage Acute, Part-Time Jobs Offered.—The shortage of nurses at the General Hospital has become so acute that part-time jobs to housewives and other women not employed full time have been offered, to work as nurse auxiliaries, it was announced on June 6 by Arthur J. Will, Director of County Institutions.

The half-time employment will pay \$65 to \$70 per month on a per diem basis, it was said. Women between the ages of 18 and 45 who have had a high school education are eligible to apply.

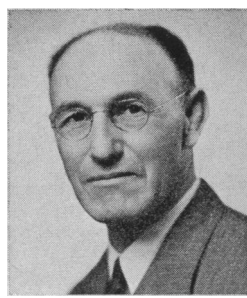
Officers and Members of the Council — California Medical Association*



CAPTAIN P. K. GILMAN
Chairman of the Council



WILLIAM R. MOLONY, SR., M.D.
Past President



KARL L. SCHAUPP, M. D.
President



LOWELL S. GOIN, M. D.
President-Elect



E. VINCENT ASKEY, M. D.
*Speaker
House of Delegates*



C. L. EMMONS, M. D.
Ontario



DONALD CASS, M. D.
Los Angeles



H. E. HENDERSON, M. D.
Santa Barbara



A. E. ANDERSON, M. D.
Fresno



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San Jose



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LYOED E. KINDALL, M. D.
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F. A. MACDONALD, M. D.
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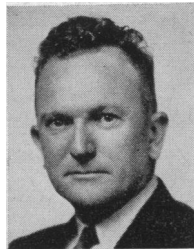
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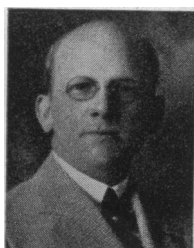
DEWEY R. POWELL, M. D.
Stockton



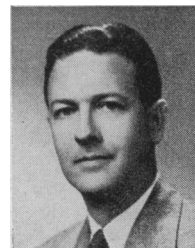
E. B. DEWEY, M. D.
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* These photographs appeared on the place cards of the Dinner to President William R. Molony, Sr., at the seventy-second annual session of the California Medical Association, in Los Angeles, May 2, 1943.